

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10625754 FILING DATE 5

APPLICANT(S)

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS
	IND	DEP	IND	DEP	IND	DEP	
1	/						
2	/						
3	/						
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TOTAL IND.	/						
TOTAL DEP.	/						
TOTAL CLAIMS	10						

	IND	DEP	IND	DEP	IND	DEP
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